## STATEMENT OF COMMISSIONER DEBORAH TAYLOR TATE

Re: In the Matter of Rural Health Care Support Mechanism, WC Docket No. 02-60

At Congress' direction, the Commission implemented a Rural Health Care support mechanism supported within the Universal Service Fund, which provides reduced rates to rural health care providers for their telecommunications and Internet services. Although this rural health care support program has been in place for nearly 10 years, unfortunately, it has been greatly underutilized.

I therefore was extremely supportive when the Chairman proposed that the Commission establish a Rural Health Care Pilot Program (Pilot Program) to examine how Rural Health Care support mechanism funds can be used to enhance public and non-profit health care providers' access to advanced telecommunications and information services. The response was overwhelming. The Commission received 81 applications representing approximately 6,800 health care facilities from 43 states and three United States territories

I am very pleased by our decision today to select 69 applicants for participation in the Pilot Program. These applicants are selected because their overall qualifications are consistent with the goals of the Pilot Program to stimulate deployment of the broadband infrastructure necessary to support innovative telehealth and, in particular, telemedicine services to those areas of the country where the need for those benefits is most acute.

I am especially proud to see three projects from my home state of Tennessee receive funding- Erlanger Health System, Mountain States Health Alliance, and the Tennessee Telehealth Network. Tennessee continues to be in the forefront on extending telemedicine- and the incredible opportunities that it provides- to all of its citizens.

I am committed to taking whatever steps possible to foster access to a healthcare network that brings 21<sup>st</sup> century medicine to every corner of the nation. It has been my vision that one day all healthcare facilities in the nation are connected to each other with broadband facilities so that pioneering communities, physicians, and hospitals can show that health care can be transformed by technology no matter where a patient lives. Among other benefits, broadband connectivity among healthcare providers will assist the President's goal of implementing electronic medical records nationwide. Moreover, broadband connectivity and the ability to share information among healthcare providers would also likely assist in addressing a national crisis, whether terrorist, natural or a pandemic flu out break.

It has been exciting for me to see first-hand how new medical technologies—when combined with broadband—can enable everything from remote surgery in the mountains of Appalachia to telepsychiatry and teledentistry in remote parts of Alaska. I have witnessed first-hand how the technology at both a research hospital and our most remote communities serves as the bridge not only to improve people's access to healthcare, but also to narrow the miles between doctor and patient, improve administrative efficiencies, and reduce the cost to the patient and our healthcare systems.

These benefits pertain, of course, to people in rural and remote parts of our country who will benefit from the access to specialists and research that, until recently, was often only available in urban or research centers. I look forward to visiting some of these new and innovative projects which literally enable innovations in technology to improve and enhance the lives of real people and especially those who live in rural areas of this great country.